

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

This declaration is of the following type:

- ☐ original
- ☐ design
- ☐ supplemental
- ☒ national stage of PCT
- ☐ divisional
- ☐ continuation
- ☐ continuation-in-part (CIP)

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed for and for which a patent is sought on the invention entitled:

"Pharmaceutical Composition For The Treatment Of Inflammatory Bowel Disease"

the specification of which

- ☐ is attached hereto
- ☐ was filed on _____, as
Application Serial No. _____
and was amended on _____
(if applicable)

- ☒ was described and claimed in PCT International application No. **PCT/GB98/02899** filed on **25th September 1998** and as amended under PCT Article 19 on **22nd March 2000** (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any Amendment referred to above.

I acknowledge duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations,

§ 1.56.

☐ In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.97.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119, of any foreign application(s) for patent or

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inventor's certificate listed below and have also identified below any foreign application for patent of inventor's certificate having a filing date before that of the application on which priority is claimed:

[] no such applications have been filed
[X] such applications have been filed as follows.

Prior Foreign Application(s)

9720590.0	GB	26th September 1997	[] []
(Number)	(Country)	(day/month/year filed)	Yes No

9725346.2	GB	28th November 1997	[] []
(Number)	(Country)	(day/month/year filed)	Yes No

I hereby claim the benefit under Title 35, United States Code, § 119 (e) of any United States provisional application(s) listed below:

_____ (Application Number)	_____ (Filing Date)
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_____ (Application Number)	_____ (Filing Date)
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I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose all information known to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

_____ (Application Serial No.)	_____ (Filing Date)	_____ (patented, pending, abandoned)
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_____ (Application Serial No.)	_____ (Filing Date)	_____ (patented, pending, abandoned)
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

9 George M. Cooper, Reg. No. 20,201
Felix J. D'Ambrosio, Reg. No. 25,721
James W. Hellwege, Reg. No. 28,808
Scott W. Brickner, Reg. No. 34,553
J. Andrew McKinney Reg. No. 34,672

Eric S. Spector, Reg. No. 22,495
Douglas R. Hanscom, Reg. No. 26,600
William A. Blake, Reg. No. 30,548
Colin D. Barnitz, Reg. No. 35,061

Send correspondence to James W. Hellwege

Direct telephone calls to:

JONES, TULLAR & COOPER, P.C.
P. O. Box 2266 Eads Station
Arlington, VA 22202

James W. Hellwege
(703) 415-1500

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I hereby declare all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Jean-Pierre SACHETTO

Inventor's signature JPSachetto MAY 9, 2000 (Date)

Residence: Basel, Switzerland

Citizenship: French

Post Office Address: Duchelweiher 13, CH-4051 Basel, Switzerland.

CH-4144 ARLESHEIM

Full name of second joint inventor: William Jeffery SANDBORN

Inventor's signature _____ (Date)

Residence: Minnesota, US MN

Citizenship: US

Post Office Address: 1132 - 7th Street, S.W. Rochester, Minnesota 55902, USA.

Full name of third joint inventor: William John TREMAINE

Inventor's signature _____ (Date)

Residence: Minnesota, US MN

Citizenship: US

Post Office Address: 625 Memorial Pkwy., S.W. Rochester, Minnesota 55905, USA.

Full name of fourth joint inventor, if any _____

Inventor's signature _____ (Date)

Residence _____

Citizenship _____

Post Office Address _____

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_____	_____	_____
(Application Serial No.)	(Filing Date)	(patented, pending, abandoned)

_____	_____	_____
(Application Serial No.)	(Filing Date)	(patented, pending, abandoned)

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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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Inventor's signature _____ (Date)

Residence: Basel, Switzerland

Citizenship: French

Post Office Address: Duchelweiher 13, CH-4051 Basel, Switzerland.

Full name of second joint inventor: William Jeffery SANDBORN

Inventor's signature *William Jeffery Sandborn* May 8, 2000 (Date)

Residence: Minnesota, US

Citizenship: US

Post Office Address: 1132 - 7th Street, S.W. Rochester, Minnesota 55902, USA.

Full name of third joint inventor: William John TREMAINE

Inventor's signature *William J. Tremaine* 05-09-00 (Date)

Residence: Minnesota, US

Citizenship: US

Post Office Address: 625 Memorial Pkwy., S.W. Rochester, Minnesota 55905, USA.

Full name of fourth joint inventor, if any _____

Inventor's signature _____ (Date)

Residence _____

Citizenship _____

Post Office Address _____

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